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Approved for use through 10/31/2002 OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**Form for new nonprovisional application under  
37 CFR 1.53(b)Attorney Docket No.:  
First Named Inventor:

Title:

Express Mail Label No.:

1665-3(a)

AUSTIN T. GAVIN  
SYSTEMS AND METHODS FOR SCHOOL DISTRICTS  
AND MUNICIPALITIES TO MAXIMIZE INTEREST  
EARNINGS ON THEIR INVESTMENTS  
EV 171220617 US**APPLICATION ELEMENTS**

MPEP chapter 6000 concerning design patent application contents

**ADDRESS TO:** Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

1. ☒ Fee Transmittal Form (e.g. PTO/SB/17)  
(submit an original, and a duplicate for fee processing)
2. ☒ Applicant claims small entity status  
See 37 CFR 1.27
3. ☒ Specification [Total Pages 19]  
(preferred arrangement set forth below, MPEP 1503.01)  
- Descriptive Title of the Invention  
- Cross References to Related Applications  
- Statement Regarding Fed sponsored R&D  
- Reference to sequence listing, a table, or a  
computer program listing appendix  
- Background of the Invention  
- Brief Summary of the Invention  
- Brief Description of the Drawings (if filed)  
- Detailed Description  
- Claim(s)  
- Abstract of the Disclosure
4. ☒ Drawings(s) (37 CFR 1.152) Total Sheets 12
5. ☒ Oath or Declaration [Total Pages 2]  
a. ☒ Newly executed (original or copy)  
b. ☐ Copy from a prior application (37 CFR 1.63(d))  
a. ☐ DELETION OF INVENTOR(S)  
Signed statement attached deleting  
inventor(s) named in the prior appl., see  
37 CFR 1.63(d)(2) and 1.33(b)
6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☒ CD-ROM or CD-R in duplicate, large table or  
Computer Program (Appendix)
8. ☐ Nucleotide and/or Amino Acid Sequence  
Submission (if applicable, all necessary)  
a. ☐ Computer Readable Form (CRF)  
b. Specification Sequence Listing on  
i. ☐ CD-ROM or CD-R (2 copies or  
ii. ☐ paper  
c. ☐ Statements verifying identity of above copies

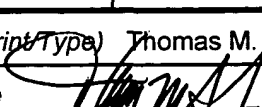
**ACCOMPANYING APPLICATION PARTS**

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☐ Power of  
(when there is an assignee) Attorney
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure ☐ Copies of IDS  
Statement (IDS) PTO-1449 Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 U.S.C. 122  
(b)(2)(B)(i) Applicant must attach form  
PTO/SB/35 or its equivalent.
17. ☒ Other: ...PTO-2038 Form.....

18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. \_\_\_\_\_

Prior application information: Examiner: \_\_\_\_\_ Group Art Unit: \_\_\_\_\_

For **CONTINUATION OR DIVISIONAL APPS** only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.**19. CORRESPONDENCE ADDRESS**☐ Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or ☒ Correspondence address below

Name	Galgano & Burke				
Address	300 Rabro Drive, Suite 35				
City	Hauppauge	State	New York	Zip Code	11788
Country	USA	Telephone	631-582-6161	Fax	631-582-6191
Name (Print Type)	Thomas M. Galgano		Registration No. (Attorney/Agent)		27,638
Signature			Date: JULY 31, 2003		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington DC 20231.

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07/31/03

PTO/SB/17 (01-03)

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**FEE TRANSMITTAL  
FOR FY 2003**

Effective 01/01/2000. Patent fees are subject to annual revision

Applicant claims small entity status.

See 37 CFR 1.27

Application Number:

Filing Date:

First Named Inventor:

Examiner Name:

Group Art Unit:

Attorney Docket No.:

AUSTIN T. GAVIN

1665-3(a)

**TOTAL AMOUNT OF PAYMENT (\$)** 444.00**METHOD OF PAYMENT** (check all that apply)☐ Check ☒ Credit Card ☐ Money Order ☐ Other ☐ None☒ Deposit Account:Deposit Account Number: **07-0130**Deposit Account Name: **Galgano & Burke**

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below☒ Credit any overpayments☒ Charge any additional fee(s) during the pendency of this application except for issue fee☐ Charge fee(s) indicated below, except for filing fee to the above-identified deposit account.**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	750	2001	375	Utility filing fee	\$375.00
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

**SUBTOTAL (1) (\$)** 375.00**2. EXTRA CLAIMS FEES FOR UTILITY & REISSUE**

	Extra Claims	Fee from below	Fee Paid
Total Claims	23 - 20** = 3	x 27 =	27
Independent Claims	4 - 3** = 1	x =	42
Multiple Dependent		=	

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2) (\$)** 69.00\*\*or number previously paid, if greater;  
For Reissues, see above**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1805	2520	1812	2520	For filing a request for <i>ex parte</i> reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1840*	1805	1840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	410	2252	205	Extension for reply within second month	
1253	930	2253	465	Extension for reply within third month	
1254	1450	2254	725	Extension for reply within fourth month	
1255	1970	2255	985	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1510	1451	1510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1300	2453	650	Petition to revive - unintentional	
1501	1300	2501	650	Utility issue fee (or reissue)	
1502	470	2502	235	Design issue fee	
1503	630	2503	315	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	750	2809	375	Filing a submission after final rejection 37 CFR §1.129(a))	
1810	750	2810	375	For each additional invention to be examined 37 CFR §1.129(b))	
1801	750	2801	375	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

**SUBTOTAL (3) (\$)** \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

SUBMITTED BY

COMPLETE (if applicable)

Name (Print/Type) Thomas M. Galgano

Registration No. 27,638

Telephon : 631-582-6161

Signature

Date: July 31, 2003

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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